PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

			SMALL ENTITY			OTHER THAN						
LEC	TAL CLAIMS		(Column 1)		(Column 2)] · 1	TYPE		OR 1		
II								RATE	FEE	-	RATE	FEE
FC)R		NUMBER FILED		NUMB	ER EXTRA		BASIC FE	395.00	OR	BASIC FEE	790.00
TC	TAL CHARGE	ABLE CLAIMS	mi	nus 20=	•			x 25		OR	x.50	
ואנ	EPENDENT C	LAIMS	in	inus 3 =	*			x 100		OR	×200	
ML	ILTIPLE DEPEI	NDENT CLAIM P	RESENT	•						OR		- <u>-</u>
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column				+130 TOTAL		OR	+360 TOTAL	
	C	LAIMS AS A	MENDED - PART II						,	OTHER		
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SKALL	ENTTY
AMENDMENT A	12/20/4	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
XQ.	Total	.93	Minus	-20)	-3		x 25		OR	×50.	150,0
ME	Independent	. 2	Minus	3		=	$ \cdot $	×100	,	OR	1200	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1100		OR	1.2/1	
·								+/80 TOTAL	<u> </u>		+360	
								OOT. FEE	L	OR	ADD:T. FEE!	
_		(Column 1)	 	(Colun		(Column 3)	1 г		ADDI-		-	ADDI-
ST B		REMAINING AFTER		PREVIO		PRESENT EXTRA		RATE:	TIONAL FEE		RATE	TIONAL FEE
NO.	Total		Minus	5-1] =	-	x 25		OR	x50	
AF	independent: Minus			33%		i . J		× 100		OR	1200	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1					
								+/80		OR	#360	
								TOTAL DOIT, FEE		OR	ADDIT. FEE	
(Table						65.5	_					
ENT C		CLAIMS REMAINING AFTER - AMENDMENT		HUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ALCONAL TIONAL .FEE
MOI	Total	*	Minus	##		= ;	\prod	×25		OR	×50	
AMENDMENT	Independent	*	Minus	***		=]	× 100	· · ·	OR	4200	
\	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
+ 180												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid Fox" IN THIS SPACE is less than 20, enter 20. ADDIT, FEE OR ADDIT, FEE												
•••	If the "Highest Nu The "Highest Nuп	rhber Previously Pa iber Previously Pai	aid For IN THI d For (Total or	S SPACE Is Independe	less than nt) is the	n 3, enter ** * highest n' r::! e			oropriate box	In opt	umn 1	.